Another Study Finds Troublingly Low Statin Use Among People With HIV

At one major St. Louis HIV clinic, only about a third of those indicated for a statin were on one of the heart-disease-preventing drugs.

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Despite the elevated risk of heart disease associated with HIV, only about a third of those at a major St. Louis HIV clinic who were indicated for use of a cholesterol-lowering statin medication were actually receiving one, the National AIDS Treatment Advocacy Project (NATAP) reports.

This study of January to December 2015 medical records of 1,085 HIV-positive people 40 or older was presented at the IDWeek 2017 conference in San Diego. It follows a study that reached similar findings about low statin use at a Chicago HIV clinic.

The researchers examined statin use according to 2013 guidelines from the American College of Cardiology and the American Heart Association (ACC/AHA). They divided the members of the St. Louis study cohort into four risk categories according to those with:

1. Clinical atherosclerotic cardiovascular disease (ASCVD, the buildup of fats, cholesterol and other substances in and on the walls of arteries)
2. LDL cholesterol of 190 or greater
3. Diabetes and LDL of 70 to 189 with diabetes but without ASCVD who were 40 to 75 years old
4. LDL of 70 to 189 without ASCVD or diabetes who had a 10-year estimated risk of developing ASCVD of 7.5 percent or greater and who were 40 to 75 years old.

The cohort members were 62 years old on average. Sixty-eight percent were Black, 31 percent were white and 71 percent were men. Forty-five percent were smokers. Ninety-eight percent were on antiretrovirals (ARVs) and 86 percent had a fully suppressed viral load. Fifty-six percent had high blood pressure, 16 percent had diabetes, 9 percent had chronic kidney disease and 5 percent had coronary artery disease.

Of 449 individuals who were indicated for a statin according to ACA/AHA guidelines, 289 (64 percent) were not on one. The proportions not taking a statin in each of the four risk categories were: group 1) 78 of 121 people (64 percent); group 2) five of nine (56 percent); group 3) 55 of 107 (51 percent); and group 4) 151 of 213 (71 percent). The proportion of those on statins in each of the four risk groups who were taking low-dose statins were a respective 56 percent, 25 percent, 63 percent and 64 percent.

Those with a higher CD4 count and those with an undetectable viral load were more likely to be on a statin. The average CD4 count among those on a statin was 630, compared with 537 among those not on a statin. A respective 93 percent and 88 percent of those on and off a statin had an undetectable viral load.

To read the NATAP report, click here.

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